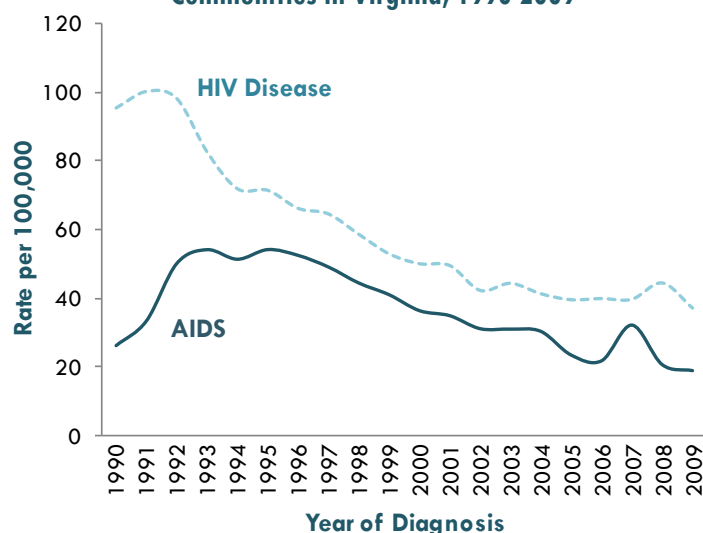


The most recent HIV incidence calculation by CDC estimates that Blacks, including African Americans, made up 44% of the total numbers of new infections in 2009 in the United States. Blacks* experienced the heaviest impact of the epidemic with an infection rate eight times that of Whites (Prejean, 2011)^.

In addition to HIV, Blacks have higher rates of sexually transmitted diseases (STDs) than any other race or ethnicity, which can increase the chances of both contracting and transmitting HIV. As in other communities, Blacks may experience drug and alcohol use, socioeconomic obstacles such as poverty and limited access to health care and housing, as well as stigma which prevents those with high-risk behaviors from seeking testing and counseling (CDC, 2010).

In Virginia, as in the US as a whole, Blacks are disproportionately affected by the HIV/AIDS epidemic at all stages of the disease (from new infections to deaths). Between 2005 and 2009, approximately one in every 2,461 Black Virginians was diagnosed with HIV disease compared to one in 19,658 Whites. While comprising only 20% of the state population, Blacks represented 61% of all HIV disease diagnoses, including AIDS diagnoses.

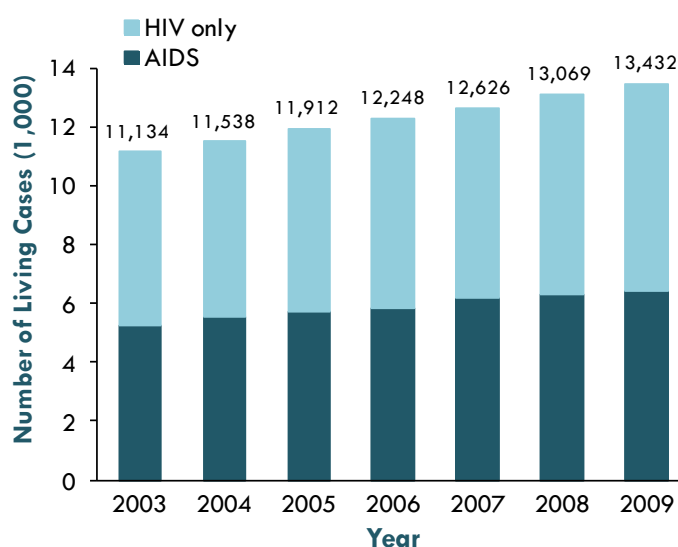
HIV Disease & AIDS Diagnosis Rates within Black Communities in Virginia, 1990-2009



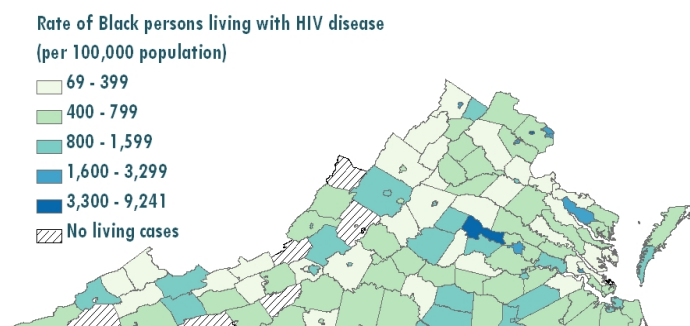
HIV/AIDS PREVALENCE

Advances in medical therapies have resulted in people living longer with HIV/AIDS. As of December 31, 2009, there were 13,432 non-Hispanic Blacks known to be living with HIV disease in Virginia, 48% of whom had progressed to AIDS. By 2009 population estimates, one in 117 Blacks was living with HIV disease, compared to one in 778 Whites and one in 383 Hispanics. Every year, Blacks account for nearly two-thirds of annual disease prevalence in the state - 60% of those living with HIV/AIDS at the end of 2009 were Blacks. Additionally, non-Hispanic Black women represent 75% of all women living with HIV.

Blacks Living with HIV Disease in Virginia, 2003-2009



Prevalence of HIV Disease among Blacks, 2009



1 in 84 Black men and 1 in 185 Black women are known to be living with HIV disease.

HIV DISEASE DIAGNOSES

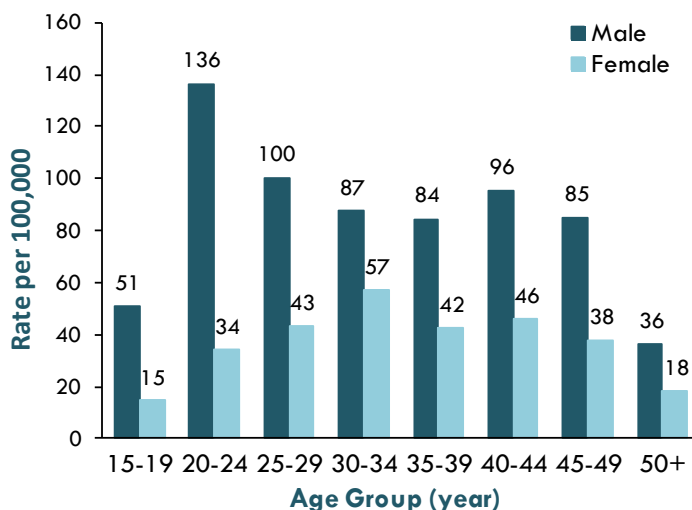
From 2005 to 2009, there were 3,149 new HIV disease diagnoses among Blacks in Virginia, with an annual average of approximately 630 cases. The diagnosis rate in this population was 40 cases per 100,000, much higher than the rates among Whites (5 per 100,000) or Hispanics (19 per 100,000).

By Gender & Age at Diagnosis

Between 2005 and 2009, the average annual rate of HIV disease diagnoses was 58 and 25 per 100,000 population among Black men and women, respectively. Males accounted for 68% of the total number of HIV disease diagnoses within Black communities during the five year period.

The age-specific rates of new diagnoses among Blacks exceeds those of any other race or ethnicity. From 2005-2009, the highest rates among Blacks occurred among males aged 20-24 (136 per 100,000) and females aged 30-34 (57 per 100,000) at the time of diagnosis. Black men between 20-24 were 12 times more likely to be diagnosed with HIV disease than their White counterparts.

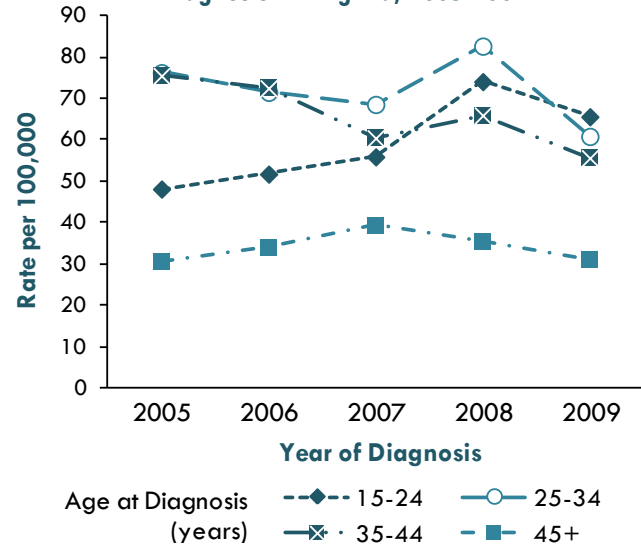
Rates of HIV Disease among Blacks by Gender and Age at Diagnosis in Virginia, 2005-2009[^]



For every 5 Black Virginians diagnosed with HIV disease, approximately:

- 3** are men
- 2** live in the Eastern region
- 2** are 20 to 34 years old at diagnosis
- 4** are attributed to sex with men

Rates of HIV Disease among Blacks by Age at Diagnosis in Virginia, 2005-2009

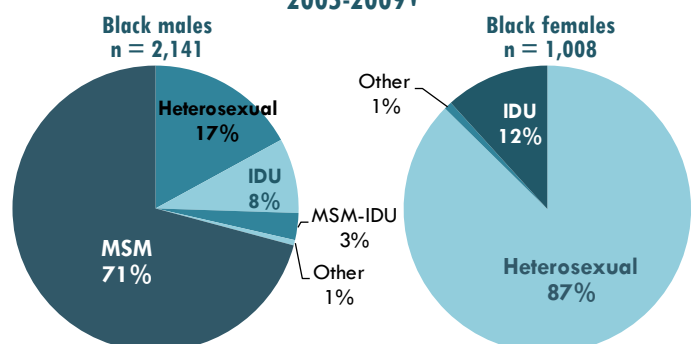


In 2009, the highest rates of HIV disease diagnoses for Blacks were among those aged 15-24 (66 per 100,000) and 25-34 (61 per 100,000) at the time of diagnosis. These rates were lower than in 2008, but annual fluctuations are expected based on recent data trends. Although Black youths aged 15-24 only represent 24% of Virginians in that age group, they accounted for 76% of the new HIV disease diagnoses from 2005-2009.

By Transmission Category[†]

For Black men, the largest percentage (71%) of new HIV disease diagnoses between 2005 and 2009 were among men who have sex with men (MSM). Among Black women, 87% of diagnoses were attributed to heterosexual contact. Other modes of transmission, such as perinatal exposure (mother-to-child) or blood transfusion, accounted for less than 1% of diagnoses among the Black population in this time period.

HIV Disease among Blacks by Transmission Category, 2005-2009[†]



BLACK MSM[†]

Between 2005 and 2009, the number of HIV disease diagnoses among Black MSM in Virginia increased 26%; diagnoses among young Black MSM aged 13-29 also increased by 64%. The HIV incidence estimate report showed that nationally, there was an increase among young MSM aged 13-29 from 2006 to 2009 (34%), but the only racial/ethnic group to experience a significant increase was young Black MSM (48%) (Prejean, 2011)[^].

A five-city study showed that Black MSM had the highest HIV prevalence among MSM and 67% of the HIV infected Black MSM were unaware of their infection (Jones, 2008; CDC, 2010). In addition, many Black males who reported sex with other men do not self-identify as “gay” and have had sexual intercourse with women. These factors, along with less-frequent testing and high rates of STDs, put Black MSM as well as the women they have sex with at high risk for HIV (Jones, 2008).

BLACK WOMEN

Since the first cases of HIV disease among Black women were reported in Virginia in 1983, the Black female population has increasingly borne the burden of infection. Since the mid-1990's, Black women represented approximately 20% of the annual total HIV disease diagnoses in Virginia, in some years surpassing the proportion represented by White MSM who had historically been the largest group affected by the HIV epidemic.

In recent years, the national rates of new HIV infection for Black women have been around 15 and 4 times higher than that of White and Hispanic women, respectively (Prejean, 2011)[^]. Some of the factors contributing to this discrepancy include African American women of lower socioeconomic status having higher exposure to poverty, drug and alcohol usage, unemployment, and limited health care, gender inequality leading to Black women unable to negotiate condom use, and childhood sexual abuse and domestic violence, especially among those who are economically disadvantaged. All of these factors are recognized as major risk factors for heterosexual transmission of HIV and

other STDs. HIV prevention strategies for this population should include counseling couples jointly, addressing past and current sexual abuse, providing education to dispel myths and stigma around HIV/AIDS, and increasing access to adequate health care, housing, and job training (El-Bassel, 2009).

There are persistent **health disparities** in HIV disease diagnosis rates between non-Hispanic Black and White men and women.

Black men are **6 times** more likely to be diagnosed with HIV disease than White men.



Black women are **21 times** more likely to be diagnosed with HIV disease than White women.



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[^]Data presented in the national HIV incidence report are annual estimates of the number of new infections, whether or not they were actually diagnosed. In contrast, Virginia data are based on new diagnoses each year, which can include persons who were infected in previous years. These two sets of data cannot be directly compared; they are presented here only to show similarity in trends.

*Blacks include African Americans and all others with origins in any of the Black racial groups of Africa.

[†]The transmission category data presented are estimated using the CDC provided multiple imputation procedure for cases reported without an identified or reported risk. The main transmission categories are men who have sex with men (MSM), injection drug use (IDU), heterosexual contact, and MSM with a history of injection drug use (MSM-IDU).